

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required)	Attorney Docket No.	DURE-045
	First Named Inventor	Brown, et al.
	Application Number	10/687,054
	Filing Date	10/15/03
	Group Art Unit	
	Examiner Name	Unknown

As a below named inventor, I hereby declare that:
My residence, mailing address, and citizenship are as stated below next to my name.

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

APPARATUS AND METHODS FOR ACTIVATING A DELIVERY DEVICE

The specification of which

☐ is attached hereto
or

☒ was filed on 10/15/03 as United States Application Number or PCT International Application Number US 10/687,054 and was amended on _____ (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application (s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? (Y/N)

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/0213 attached hereto:

I hereby claim the benefit under Title 35, United States Code, Section 119(e) of any United States provisional application(s) listed below.

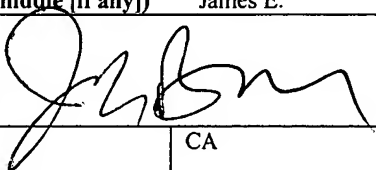
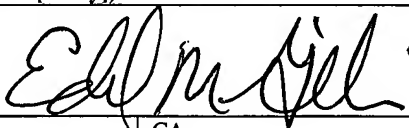
Application Serial No.	Filed	Status (Pending, Abandoned, Patented)
60/419,273	10/16/02	Inactive

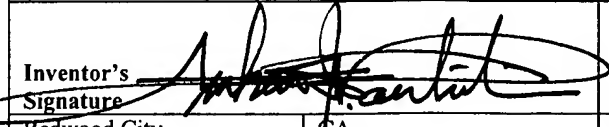
I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States applications listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in said prior applications in the manner required by the first paragraph of Title 35, United States Code Section 112, I acknowledge my duty to disclose material information as defined in Title 37 Code of Federal Regulation, Section 1.56(a) which occurred between the filing dates of the prior applications and the national or Patent Cooperation Treaty international Filing date of this application:

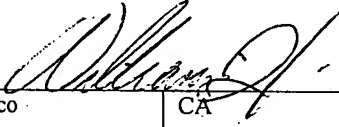
Application Serial No.	Filed	Status (Pending, Abandoned, Patented)



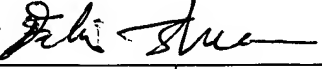
DECLARATION- Utility or Design Patent Application

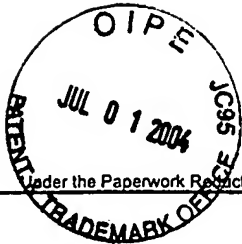
Direct all correspondence to: <input checked="" type="checkbox"/> Customer number		OR <input type="checkbox"/> Correspondence	
Or barcode label		address below.	
31498			
Name:			
Address:			
City:	State:	Zip	
Country:	Telephone:	Fax:	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information or belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> a petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) James E.		Family Name Or Surname Brown	
Inventor's Signature 		Date 6/18/04	
Los Gatos	CA	US	US
Residence: City	State	Country	Citizenship
126 Blueberry Hill Drive			
Mailing Address			
Los Gatos	CA	95032	US
City	State	Zip	Country
NAME OF SECOND INVENTOR:		<input type="checkbox"/> a petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Edward M.		Family Name Or Surname Gillis	
Inventor's Signature 		Date Jun 18 2004	
San Jose	CA	US	US
Residence: City	State	Country	Citizenship
1548 Touraine Drive			
Mailing Address			
San Jose	CA	95118	US
City	State	Zip	Country
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>4</u> supplemental Additional Inventor(s) Sheet(s) PTO/SB/02A attached hereto.			

DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet - Page 2 of 5	
Name of Additional Joint Inventor:		<input type="checkbox"/> a petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Andrew I.		Family Name Or Surname Poutiatine	
Inventor's Signature 		Date 4/01/04	
Redwood City	CA	US	US
Residence: City	State	Country	Citizenship
516 Buena Vista Ave. Mailing Address			
Mailing Address			
Redwood City	CA	94061	US
City	State	Zip	Country
Name of Additional Joint Inventor:		<input type="checkbox"/> a petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) William D.		Family Name Or Surname Kolosi	
Inventor's Signature		Date	
San Francisco	CA	US	US
Residence: City	State	Country	Citizenship
1714 38 th Ave. Mailing Address			
Mailing Address			
San Francisco	CA	94122	US
City	State	Zip	Country
Name of Additional Joint Inventor:		<input type="checkbox"/> a petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) James R.		Family Name Or Surname Flom	
Inventor's Signature		Date	
San Francisco	CA	US	US
Residence: City	State	Country	Citizenship
357 Upper Terrace, Apt. #2 Mailing Address			
Mailing Address			
San Francisco	CA	94117	US
City	State	Zip	Country

DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet - Page 3 of 5	
Name of Additional Joint Inventor:		<input type="checkbox"/> a petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Andrew I.		Family Name Or Surname Poutiatine	
Inventor's Signature		Date	
Redwood City	CA	US	US
Residence: City	State	Country	Citizenship
516 Buena Vista Ave. Mailing Address			
Mailing Address			
Redwood City	CA	94061	US
City	State	Zip	Country
Name of Additional Joint Inventor:		<input type="checkbox"/> a petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) William D.		Family Name Or Surname Kolosi	
Inventor's Signature 		Date 5/27/04	
San Francisco	CA	US	US
Residence: City	State	Country	Citizenship
1714 38 th Ave. Mailing Address			
Mailing Address			
San Francisco	CA	94122	US
City	State	Zip	Country
Name of Additional Joint Inventor:		<input type="checkbox"/> a petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) James R.		Family Name Or Surname Flom	
Inventor's Signature		Date	
San Francisco	CA	US	US
Residence: City	State	Country	Citizenship
357 Upper Terrace, Apt. #2 Mailing Address			
Mailing Address			
San Francisco	CA	94117	US
City	State	Zip	Country

DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet - Page 4 of 5	
Name of Additional Joint Inventor:		<input type="checkbox"/> a petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Andrew I.		Family Name Or Surname Poutiatine	
Inventor's Signature		Date	
Menlo Park	CA	US	US
Residence: City	State	Country	Citizenship
320 Nova Lane Mailing Address			
Mailing Address			
Menlo Park	CA	94025	US
City	State	Zip	Country
Name of Additional Joint Inventor:		<input type="checkbox"/> a petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) William D.		Family Name Or Surname Kolosi	
Inventor's Signature		Date	
San Francisco	CA	US	US
Residence: City	State	Country	Citizenship
1714 38 th Avenue Mailing Address			
Mailing Address			
San Francisco	CA	94122	US
City	State	Zip	Country
Name of Additional Joint Inventor:		<input type="checkbox"/> a petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) James R.		Family Name Or Surname Flom	
Inventor's Signature <i>James R Flom</i>		Date <i>3-14-04</i>	
San Francisco	CA	US	US
Residence: City	State	Country	Citizenship
357 Upper Terrace, Apt. #2 Mailing Address			
Mailing Address			
San Francisco	CA	94117	US
City	State	Zip	Country

DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet - Page 5 of 5	
Name of Additional Joint Inventor:		<input type="checkbox"/> a petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Felix		Family Name Or Surname Theeuwes	
Inventor's Signature 		Date 6/18/04	
Los Altos Hills	CA	US	BE
Residence: City	State	Country	Citizenship
27350 Altamont Road Mailing Address			
Mailing Address			
Los Altos Hills	CA	94022	US
City	State	Zip	Country
Name of Additional Joint Inventor:		<input type="checkbox"/> a petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name Or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country
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Given Name (first and middle [if any])		Family Name Or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country



POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	10/687,054
Filing Date	10/15/03
First Named Inventor	BROWN, et al.
Title	
Art Unit	unknown
Examiner Name	unknown
Attorney Docket Number	DURE-045

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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name James E. Brown

Signature

Date

6-18-04

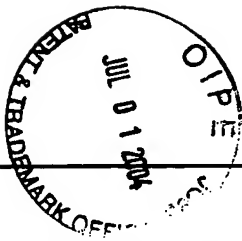
Telephone

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 6 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**POWER OF ATTORNEY OR
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Attorney Docket No.	DURE-045
First Named Inventor	BROWN, et al.
Application Number	10/687,054
Filing Date	10/15/03
Group Art Unit	unknown
Examiner Name	unknown

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City					
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Telephone		Fax			

I am the:

☒ Applicant/Inventor

☐ Assignee of record of the entire interest. See 37 C.F.R. 3.71.

Statement under 37 C.F.R. 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	James R. Flom
Signature	<i>James R. Flom</i>
Date	6-16-04

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 6 forms are submitted.



POWER OF ATTORNEY OR AUTHORIZATION OF AGENT	Attorney Docket No.	DURE-045
	First Named Inventor	BROWN, et al.
	Application Number	10/687,054
	Filing Date	10/15/03
	Group Art Unit	UNKNOWN
	Examiner Name	unknown

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OR

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Address					
City					
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Telephone			Fax		

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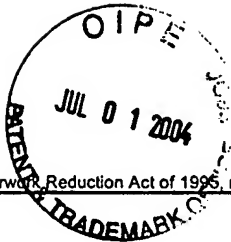
Statement under 37 C.F.R. 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	William D. Kolosi
Signature	
Date	5/27/04

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 6 forms are submitted.



PTO/SB/81 (05-03)

Approved for use through 11/30/2005. OMB 0651-0035

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**POWER OF ATTORNEY OR
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Application Number	10/627,054
Filing Date	10/15/03
First Named Inventor	Brown, et al.
Title	
Art Unit	Unknown
Examiner Name	Unknown
Attorney Docket Number	DURE-045

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Name	Registration Number

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☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).**SIGNATURE of Applicant or Assignee of Record**Name **Felix Theeuwes**Signature *Felix Theeuwes*Date **06/18/04**

Telephone

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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Attorney Docket No.	DURE- 045
First Named Inventor	Brown, et al.
Application Number	10/687,054
Filing Date	10/15/03
Group Art Unit	unknown
Examiner Name	unknown

I hereby appoint:

☒ Practitioners at Customer Number 31498

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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OR

☐ Practitioners at Customer Number →

OR

<input type="checkbox"/> Firm or Individual Name					
Address					
Address					
City					
Country		State		Zip	
Telephone		Fax			

I am the:

☒ Applicant/Inventor

☐ Assignee of record of the entire interest. See 37 C.F.R. 3.71.

Statement under 37 C.F.R. 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Andrew J. Portiatine
Signature	
Date	6-21-04

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 6 forms are submitted.